



W. TRANSPORTATION

Description. AHCCCS covers the following transportation services:

1. Emergency
2. Medically necessary (non-emergency), and
3. Medically necessary maternal and newborn transportation.

Emergency transportation - Emergency transportation does not require PA from the AHCCCS/DFSM/PA Unit, although such services are only covered to the nearest medical facility which is medically equipped and staffed to provide appropriate medical care.

Emergency transport to out-of-state facilities is covered only when the out-of-state facility is the nearest appropriate facility.

Medically necessary non-emergency transportation – PA is required for medically necessary (non-emergency) transportation when the mileage is greater than 100 miles round trip. Medically necessary transportation of 100 miles or less, round trip, does not require PA.

Transportation is limited to the cost of transporting the member to a registered provider capable of meeting the member's medical needs. Transportation must only be provided to transport the member to and from the required covered medical service.

Maternal and newborn transportation - Medically necessary maternal and newborn transportation, as specified in Chapter 300, does not require PA.

Refer to [Chapter 300](#), Policy 310 for a complete description and discussion of covered transportation services.

Procedures. In addition to requirements for all PAs (specified in Policy 810 of this chapter) the following conditions must also be met when PA is requested for non-emergency medically necessary transportation.



The following information must be provided when requesting PA either by telephone or via fax:

1. Physician's order
2. Descriptions of disability requiring special transport and/or special circumstances
3. Type of transportation and need for attendant services, as appropriate
4. Estimated cost of transportation, attendant services, meals or lodging, as appropriate
5. Verbal or written representation from the member that other transportation is not available.

PA for non-emergency medically necessary transportation provided to AHCCCS FFS members or IHS-enrolled members through the use of a private vehicle must be requested by the member's medical service provider. PA for transportation will not be issued unless the transportation provider is an AHCCCS registered provider prior to seeking PA.

Refer to the AHCCCS FFS Provider Manual or AHCCCS Billing Manual for IHS/Tribal providers for provider registration and billing information. Both of these manuals are available on the AHCCCS web site.

X. TRIAGE/SCREENING AND EVALUATION OF EMERGENCY MEDICAL CONDITIONS

Description. Triage/emergency medical screening and evaluation services are the medically necessary screening and assessment services provided to FFS, acute care and ALTCS members in order to determine whether or not an emergency medical condition exists, the severity of the condition, and those services necessary to alleviate or stabilize the emergent condition. These services are covered services if they are delivered in:

1. An acute care hospital emergency room
2. A free standing urgent care center, or
3. An Indian Health Service (IHS) hospital emergency room. This applies only to emergency medical assessment services provided to Native Americans who are enrolled with a Contractor but receive the triage/emergency medical assessment services through an IHS hospital.